# Ambassador's Fund for HIV/AIDS Relief

Twice a year, the United States Ambassador's Fund for HIV/AIDS Relief (AFHR) in Tanzania awards grants ranging from \$5,000 to \$30,000 to support small community and faith-based organizations (CBOs and FBOs) that are making significant contributions to the fight against HIV and AIDS in Tanzania.

The AFR targets projects that provide care and support programs to assist individuals and communities affected by HIV and AIDS. Generally, grants fall into two categories:

- Support for orphans and vulnerable children (OVC) affected by HIV and AIDS.
- Support for community-based HIV and AIDS care and support activities, particularly for people living with HIV and AIDS (PLWHA).

Grants cannot be used for the direct costs of antiretroviral treatment, but can support services, efforts and programs that indirectly support an individual's successful HIV treatment regimen.

### **Eligibility**

AHRF awards are awarded to community-based groups or organizations, assisting PLWHA or OVC affected by HIV and AIDS. Projects are initiated locally, administered at the local level, and include significant community contributions in cash, labor or materials.

#### **Selection Criteria**

The AFHR focuses on projects with the following qualities:

- Foster community self-reliance
- Have significant community participation and contributions volunteer time and labor, donated land, equipment and/or materials
- Deliver measurable results (e.g. number of people served) to assist the target population affected by HIV and AIDS.
- Help improve basic economic and/or social conditions at the local community or village level
- Fall within the ability of the local community to implement and maintain into the future.
- Completed within one year.
- Are viable and sustainable in terms of finance, support, and necessary expertise and services

### **The Selection Process**

Your group will be notified when we receive your application and supporting documents, and will contact your group if any clarifications are needed. A Review Committee meets in May/June and again in October/November to determine winning awards. Your group will be notified by July or December depending on when your application was submitted. If selected, your group will be notified and representatives from your group will be invited to attend a workshop, sign agreement contract and participate in an awards ceremony. Funds will be available several weeks following.

**TAFADHALI**: Jihadhari na matapeli (au udanganyifu) Kumekuwa na matukio mengi ya watu kutapeliwa na wajanja wachache wanaodai kuwa wao ni "Wawakilishi wa Ubalozi" wanaoweza kufanikisha maombi ya misaada ubalozini, kwa malipo. Kama una maswali yanayohusu misaada inayotolewa na Ubalozi, tafadhali piga simu Ubalozini wewe mwenyewe, na omba kuongea na Mratibu wa Misaada ya Ubalozi ambaye ni Mmarekani.

## **Instructions for Submitting a Completed AFHR Application**

- 1. Submit application in English.
- 2. Provide support materials and documentation, including the following. Please do not provide more materials than what is requested here:
  - Minutes from group meetings which discuss and approve this project with details of plan and request. Please include names of all members present.
  - Complete and detailed budget. The budget for the entire project should be detailed with clear indication of the items supported by the group and items requested for support through AFHR. In most cases, grant money cannot be used to pay for salaries, ongoing administrative costs or food. VAT must be paid by the group.
  - Pro forma invoices for all major items listed in the budget
  - Detailed work plan (i.e. timeline)
  - Detailed map to group's office and activity location from nearest large town.
  - Copy of groups registration
  - Groups organizational chart
  - One letter of community support for the proposed project from relevant local official. For example, if the project is school related, the letter would come from District Education Officer.
  - Business plan if the project is an income generating activity. The business plan should demonstrate an understanding of the product or service to be produced, customers to be served and should include a marketing plan.
  - Provide a Construction/renovation project plan, if applicable.
  - Value Added tax (VAT) exemption Certificate, if applicable.
- 3. Clearly indicate your group's cost-share. The application must include specific details of your group's contribution to the project, either through budget and/or in the narrative sections of the application.
- 4. Provide reliable contact information. Assure that all three contact persons have a cell or land phone and email address which is current.
- 5. Request the minimum amount of funding required. **Projects which show the most efficient** use of funds are the most likely to receive a grant.

## **Examples of Funded Project Proposals**

The AFHR is always interested in receiving applications for innovative projects, but these are example of projects that have been successful. (Please note that this list is not comprehensive, but for example only).

- Home-based care kits and medical supplies including educational materials
- Construction or refurbishment of orphanage\*
- Training for staff and volunteers for a specific activity such as economic development
- Equipment for OVC support sites
- Educational materials and training supplies
- Equipment for income generation initiatives
- PLWHA outreach and support activities
- Solar power for a clinic

All of these projects, furthermore, have a clear impact on the target population of OVC affected by HIV and AIDS, and/or people living with HIV and AIDS.

\*All construction projects have an additional form and approval process. Your group may obtain the form from the website or email address shown below. Submit the completed form along with your group's application.

### The following projects are NOT eligible for an Ambassador's Fund for HIV/AIDS Relief.

- Projects that do not demonstrate a clear contribution to the target population of OVC affected by HIV and AIDS and/or PLWHA
- Construction or expansion of medical clinics
- Purchase of food (flour, eggs, etc.)
- Start-up projects (Your group must be established.)
- Personal/individual/single family enterprises, including for tuition
- Projects of a purely political, military or religious nature
- Exam fees

## **Measuring Results**

Successful projects have the capacity to deliver measurable results. Your group's project must be able to report on the results produced by the grant, which demonstrates the work that the project has accomplished. Page 3 of the application asks for these statistics. For example, an OVC care program might report that over the last year, 75 OVC received food support and child protection. A program of home-based care providers might explain that they provide care to 120 patients annually. A drop-in centre might train eight community volunteers as activity coordinators each year.

Each project receiving funding must report its results twice a year (approximately April 1 and October 1). Depending on the focus of your project, below are <u>examples</u> of data you would report (count or describe) on these two dates:

## Orphans and Vulnerable Children (OVC) Projects

- Number of OVC provided with a minimum of one OVC core service, reported by sex (Male/Female) and age (<18/18+). Core services provided include shelter, education, general care.
- Number of OVC care providers trained.

## Community-based Palliative and Home Based Care Projects

- Number of HIV+ eligible adults and children provided with home based care services, reported by sex (Male/Female), age (<18/18+) and type of care (physical/spiritual/psychological/social support).
- Number of households with at least one OVC/MVC/PLHIV/Caregiver provided with a minimum of one economic opportunity/strengthening support.
- Number of care providers trained to provide HIV-related palliative and home care.

We are available to provide assistance on data reporting to all projects receiving funding.

**Please Note:** Application forms and materials will not be returned so please keep a copy for the group's records. Please do not send original documents which you need returned (for example a certificate of registration).

### Applications can be submitted by email (preferable!) or posted to:

Community Grants Coordinator United States Embassy P.O. Box 9123, Dar es Salaam

Telephone: 255-22-229-4602, Fax: 255-22-229-4971

Email: selfhelpd@state.gov

# Application for U.S. Embassy's Community Grants Program

To apply for an Ambassador's Community grant, submit this six (6) page application form along with the required supporting documentation below:

- Minutes from group meetings which discuss and approve this project with details of plan and request. Please include names of all members present.
- Complete and detailed budget. The budget for the entire project should be detailed with clear indication of the items supported by the group and items requested for support through this grant.
- Pro forma invoices for all major items listed in the budget
- Detailed work plan (i.e. timeline)
- Detailed map to group's office and activity location from nearest large town.
- Copy of groups registration
- Groups organizational chart
- One letter of community support for the proposed project from relevant local official.
- Business plan if the project is an income generating activity. The business plan should demonstrate an understanding of the product or service to be produced, customers to be served and should include a marketing plan.
- Provide a Construction/renovation project plan, if applicable.
- Value Added tax (VAT) exemption Certificate, if applicable.

Date:	Contact Information
Group/Organization Registered Name	
Project Name	
Primary Contact Person	
Land Number	
Cell Number	
Email Address	
Secondary Contact Person	
Cell Number	
Email Address	
Third Contact Person	
Cell Number	
Email Address	
Project Address	
District & Region	
Group Name on Bank Account	
Bank Name and Account Number	

# **Project Information**

GRANT REQUEST (in TSH):
Provide a <u>brief</u> summary of the proposed project. What is the activity the organization is
proposing to do with these funds? Please do not provide a background statement here on the
community or issues. Describe the activity only:
List the primary steps that must be completed for the project to succeed.
What are the examination's and/or community's contributions to this project? Planes he enceific
What are the organization's and/or community's contributions to this project? Please be specific and list items and their value.
and list items and their value.
Why is this project needed? Who will benefit from this project? How will the project benefit your
organization, your members, and the community? (Please be specific)

### **Beneficiaries**

How many people will **directly** benefit from this proposed project? Direct beneficiaries are the people who will make use of this project. For example, 50 students will use new school desks; 20 group members will use new tailoring machinery.

Total Females	+	Total Males	=	
Girls 0-17 yrs		Boys 0-17 yrs		
Women 18 yrs+		Men 18 yrs+		

How many people will **in-directly** benefit from this project? In-direct beneficiaries are people who will not make use of the project, but will still benefit from the project. For example, if the 20 members who will use new tailoring machinery each have 5 children, 100 people will in-directly benefit from the project.

Women 18 yrs+		Men 18 yrs+		
Girls 0-17 yrs		Boys 0-17 yrs		
Total Females	+	Total Males	=	

Who will manage the grant money and the project (list person(s) and title(s))?

Will another person or organization provide this project with assistance (e.g. financial, administrative or technical)? If yes, please list the person or organization and the nature of their support. Include contact information.

Please describe how the project will be self-sufficient at the end of the self-help funding.

U.S. Embassy grant money cannot be used to pay for Value Added Tax (VAT) on purchases. Is your organization VAT Exempt? If yes, please provide the VAT exemption certificate. If no, can your group afford to pay the VAT on purchased items with other sources of funds? For example, if the group receives a grant of TSH 5,000,000 to purchase carpentry equipment how would they pay the TSH 900,000 in VAT?

Organization Information	
In what year was this organization established?	
Is this organization registered in Tanzania?	
How many members does your organization have?	
How many people receive a salary/payment from this organization?	
Does this organization have a bookkeeper?	
What is the organization's yearly budget (how much does your group spend in a year)?	
What is your organizations core work?	
Who benefits from your organization's activities (please be	e specific)?
List the assets and the value of the assets owned by the grown money in bank):	roup (for example, land, equipment,
Has this organization received Community Grants Funding please give the name of the project and the year awarded	-

How does your organization fund activities and administration costs? (Please be specific. For example, if the operating budget comes from private donations, than please describe or name the donors)

List the organization's three main achievements over the past three years (include place and dat of accomplishment):
1.
2.
3.

List your organization's main goals for the next three years:

- 1.
- 2.
- 3.

# **Project Committee**

Please list all Project Committee or Group Members working on this project. Include an additional page if necessary.

	Name	Title	Contact Information Cell number or Email address
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

## **Community Support**

Please include one (1) letter of community support with this application clearly endorsing the proposed project. This letter may come from your Village Executive Officer, District Executive Director, or if relevant to the project, District Education or Health Officers. Please provide information below regarding this letter.

Name of Community Support Person	Office, Title	Contact Information Cell number and Email address

#### References

Please provide two (2) independent references for your group if available. These references will be able to verify the group's successes and/or the project coordinator's ability to organize and manage this project.

	Name of Reference	Organization	Relationship with Project	Contact Information Cell number and Email address
1				
2				

# **Applicant Signature**

I certify that all information contained in this form is correct to the best of my knowledge.

nt Name. Title	Signature	Date

Your group can access additional information on the Ambassador's Community Grants Program, as well as an on-line copy of the application, at <a href="http://tanzania.usembassy.gov/grants.html">http://tanzania.usembassy.gov/grants.html</a>.

Please contact the US Embassy Community Grants Coordinator if your group has any questions. We can be reached at <a href="mailto:selfhelpd@state.gov">selfhelpd@state.gov</a>.